

**FORM OF NOMINATION FOR PAYMENT OF THE AMOUNT SECURED
UNDER PERSONAL ACCIDENT INSURANCE POLICY (GROUP) & TERM LIFE
INSURANCE POLICY (GROUP)**

To,
HR Manager
Reliance Industries Ltd.

Dear Sir/Madam:

I, Mr./Mrs./Ms.Himanshu Raj am engaged as an employee with Reliance Industries Ltd. under the terms of my employment, the company has extended the benefit of Personal Accident Insurance and Term Life Insurance to me and I am covered under the said Group Policies of the Company during the term of of my employment with the Company.

I hereby nominate the person(s) mentioned below to receive the amount secured by Personal Accident Insurance Policy (Group) & Term Life Insurance Policy (Group) and direct that the said amount shall be paid to my nominee(s), as the case may be, as per my directions given herein.

I agree that payment of the amount secured by the said policy to the nominee(s) in accordance with my directions contained in this letter of nomination shall constitute a full discharge to Reliance Industries Ltd. of its liability in respect of the amount secured by the said policy and it shall be binding on me and my legal heir(s), representative(s), Nominee(s).

The nomination shall be in force until revoked by me in writing or varied by subsequent nomination(s) and communicated to you.

Name and address of the Nominee(s)	Nominee(s) Relationship with Employee	Age of Nominee (In Years)	% of Share Payable to the Nominee (s)	If the Nominee is minor, details of guardain who may receive the amount on behalf of the minor during the nominee's minority
Rakesh Kumar	Father	45 Yrs.	50.00%	
Vill.Niwada,P.O .LodipurNiwada, Hamirpur,UP,210 501				
Jay Kunwar	Mother	40 Yrs.	50.00%	
Vill.Niwada,P.O .LodipurNiwada, Hamirpur,UP,210 501				

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Signed at.....this **Thirtieth** day of **August** ' **2025** .

(Signature of Employee)
E.C.No.- 10109100

Witnessed by :

1.Name :

Address :

Signature :

2.Name :

Address :

Signature :